Parent Knowledge, Attitudes, Beliefs and Behaviors Related to Youth Drug Use



Arizona Parents Survey 2000

Arizona Parents Commission on Drug Education and Prevention 1700 West Washington Suite 101 Phoenix, Arizona 85007

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The study was conducted and the report outhored by a team of faculty researchers at Arizona State University's

Department of Secology and its Survey Research Laboratory;
Dr. Gary W. Peresson, Dr. Zhendron Qian,
Shopard Wolf, William Edwards,
Richard Nagasawa, and Yujun Met.

Rudy Navarra, Governor's Division of Drug Policy, also prepared sections of the report.

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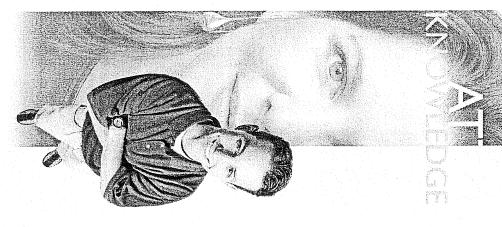
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#### Overview

hood through adolescence. haviors strongly influence a child's risk for drug use from early child-Studies have consistently shown that parent attitudes, beliefs, and be-Parents are critical in preventing their children from using drugs.

knowledge, this is the first time research has focused on Arizona Several studies have examined these issues in national samples. To our their own parenting behaviors that can affect their child's drug use. to or reduce the chances of their child using drugs, and perceptions of toward drug use, parents' knowledge of the kinds of things that can lead These include such things as parents' drug use and their attitudes of parent factors that increase or decrease a child's risk for drug use. sentative sample of parents throughout the state of Arizona on a variety The 2000 Arizona Parents Survey collected information from a repre-

and to direct Parents Commission funds to address those needs. ings will be used to better understand the needs of parents in Arizona caused by the abuse of alcohol and controlled substances. Survey findcrease education about the serious risks and public health problems by voter initiative to increase and enhance parental involvement and in-Drug Education and Prevention. The Commission was created in 1996 The survey was sponsored by the Arizona Parents Commission on

#### Method

representative sample of 1500 Arizona parents. Parents with children The Parent Survey collected information via telephone from a digit dialing procedure and were contacted between October 21, 1999 under the age of 18 who live at home were selected using a random

The Arizona Prevention Resource Center and Arizona State

telephone interviews and managed the data. University's Survey Research Laboratory conducted the and survey instrument and analyzed the data. Arizona State University's Department of Sociology designed the research

average of 23 minutes to complete. The response rate The instrument consisted of 122 questions and took an

that these households are concentrated in the lowest a telephone could not be contacted. National data shows Because this was a phone survey, households without mate the influence of the lowest income households. showing differences by income groups probably underestieconomic strata. Therefore, any findings of the study

#### Key Findings

Parenting behaviors

thought that spending enjoyable time with their might lead to or prevent youth from using drugs. For Parents have a good knowledge of the things that where their child was after school might prevent their chilchildren, giving children love and affection, and knowing example, over 90% of parents responding to the survey

is to do what is right. Over 80% of parents described themselves as showing a lot of approval toward their child 85% of parents described themselves as enjoying spending time with their children, giving their child love and would reduce their child's risk for drug use. Over Parents also see themselves behaving in ways that affection, enforcing curfew, and explaining how important it

and knowing what their child is doing when not in school.

spanking" and "yelling a lot" is a risk factor for youth drug When it came to disciplining their children, parents' knowl-國 A minority of parents, 45%, thought that "hitting parental punitiveness, defined in the survey, as "hitting or lead to drug use was mixed. Research has shown that use. The parents we spoke with had the following responses: edge and behavior related to things that might prevent or

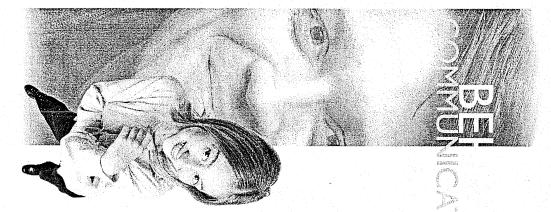
- Fifty-seven percent thought that yelling a lot might lead to or spanking" might lead to drug use
- 题 Fifty percent described themselves as not yelling at their child
- Seventy-eight percent said they do not punish their child by hitting or spanking.

stressed parents were less capable than other their child used marijuana. arguments with their child, and were more likely to believe love for their child, had more frequent and serious For example, depressed and stressed parents expressed less parents of protecting their children from drug use. depression and stress. We found that depressed and The Parent Survey included questions that measured parent

#### Salience of drug problems

tions such as the police, schools, or government for should be more responsible than other organiza-Almost 90% of parents surveyed think that parents Parents take their role in drug abuse prevention seriously.

Parents see drug and alcohol abuse as bigger problems for the children in their neighborhood than guns or violence.



题 Seventy-one percent of parents think drugs are a big problem or somewhat of a problem for youth in their neighborhood.

Sixty-eight percent of parents think that alcohol use is a big problem or somewhat of a problem for youth in their neighborhood

youth in their neighborhood (71.2%) than there are parents who think be misplacing their concern. that children use alcohol more frequently than drugs and that they are children. There are more parents who think drugs are a problem for more likely to start their drug use behavior with alcohol, parents may alcohol is a problem for youth in their neighborhood (67.7%). Given Parents may misperceive the risk alcohol use poses for their

#### Perception of child's drug use

derestimated their child's marijuana and other illicit drug use. Parents accurately predicted their child's alcohol use but un

- **题** Fifty percent of parents believed their child had drunk alcohol ever Drug Abuse, 47.6% of Arizona youth ages 12-17 reported ever having a in their life. According to the 1998 National Household Survey on
- 麗 Nineteen percent of parents believed their child had used Drug Abuse, 25.2% of Arizona youth ages 12-17 report having used marijuana. According to the 1998 National Household Survey on
- Five percent of parents believed their child to have used other drugs. other than marijuana. 21.6% of Arizona youth ages 12-17 report having used an illicit drug According to the 1998 National Household Survey on Drug Abuse,

more likely to think their children had used these substances. Parents who had used alcohol, marijuana or other drugs were

## Parent communication about drug use

of parents report speaking with their children about drug use children and what children report hearing. Ninety-eight percent There is a gap between what parents report saying to their

> that only 63 percent of youth surveyed report having had a National Center on Addiction and Substance Abuse found frequently or sometimes. However, a 1999 survey by the serious discussion with their parents about the risk of

their child about alcohol A substantial majority of parents feel they have drugs and 76% feel they have enough information to talk to they have enough information to talk to their children about their child is 12 years old. More than 62% of parents feel age. Ninety-eight percent of parents think they should drug use and that these talks should start at an early enough information to talk to their children about communicate with their children about drug use by the time

norms related to drug use Parent attitudes and perception of community

schools are strict when it comes to drug use and 66% think that most of the adults in their neighborhood are their communities as having similar attitudes. A teenagers. Eighty-three percent of parents think their against the use of drugs and alcohol by children and marijuana is OK sometimes. Eighty-four percent of parents drug use is wrong and strongly disagreed that smoking substantial majority of parents (78.6%) strongly agreed that Parents have strong anti-drug attitudes and perceive thought that police in their neighborhood were strict

Differences between parents in urban and rural areas

and engaged in similar parenting behaviors that Parents in rural and urban areas held similar beliefs

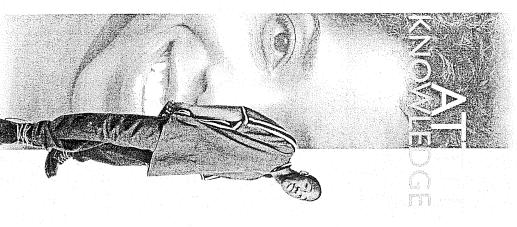
> parents to enforce family rules, know what their children could affect their child's risk for drug use. When there other drugs. more likely to check if their children were using alcohol or were doing after school, and believe that they are able to were differences, urban parents were more likely than rural deal with their child's behavior. Parents in rural areas were

EXECUTIVE SUMMARY

the risk factors for substance use Differences between parents who know and those that do not

fewer of the parenting behaviors and attitudes that that could lead to their child's drug use reported Parents who were not knowledgeable of the factors have been shown to prevent drug use. For example,

- less likely to know the whereabouts of their children and
- more likely to feel they are unable to prevent their 觀 less likely to actively monitor and check their children's alcohol and drug use
- children from using alcohol and drugs
- 翼 more likely to feel that their children's behavior is more than they can handle



for 6th graders to 72.8% for 12th graders. In the case of illegal drugs, 17.3% for methamphetamines, as well as 6.3% and 15.6% for inhalants. the comparable figures were 7.1% and 48.5% for marijuana, 5.1% and (1996) indicated that alcohol use for Arizona youth ranged from 13.6% figures for 1996 provided by the Arizona Criminal Justice Commission believe that their children use illegal drugs. In contrast, actual use Arizona's parents believe that their children drink alcohol, and only 4% Drugs (Drug Strategies, 1998), for example, indicated that only 6% of recent research publication entitled Arizona Profile: Alcohol, Tobacco & the lives of Arizona's children and adolescents (Drug Strategies, 1998).A drug use to be considerably lower than the actual level of occurrence in adolescents. In the past, parents have perceived youthful alcohol and young and the actual degree of use reported by Arizona's children and what parents perceive to be the degree of alcohol and drug use by the A considerable gap has existed in Arizona and in other states between

not be consistent with the real circumstances. Arizona's parents about the risks of youthful alcohol and drug use may by children and adolescents. Clearly, the attitudes and beliefs of various risk and protective factors that influence alcohol and drug use parents are aware of the actual levels of youth substance use and the These figures emphasize the need to thoroughly understand how much

Fishbein, 1980) action to diminish alcohol and drug use by their own children (Ajzen & that parents will become involved in prevention activities and take attitudes toward substance abuse. It can also increase the likelihood ness of the risks that children face is one method of changing parents' awareness of the realistic risks faced by Arizona's youth. Greater aware-Parents may need greater knowledge about substance use and greater

#### INTRODUCTION

is needed about the specifics of parent perceptions so that ous research has established the existence of parent's In particular, it is important to understand (1) what Arizona misperceptions and lack of knowledge, additional information cussed on adolescent behaviors and beliefs. Although previprofessionals design more precisely focussed prevention and can be encouraged. Acquiring this knowledge can help ties as well as (2) how their involvement in prevention efforts prevented in families, schools, neighborhoods, and communiparents believe are ways that alcohol and drug use can be effective prevention/intervention programs can be designed. Much of the research on alcohol and other drug use has fo- A potentially productive way of dealing with youthful intervention and prevention (Bogenschneider, 1996). and are more likely to identify appropriate mechanisms for Arizona's parents, are more likely to enlist their involvement, intervention programs that respond to the critical needs of

protecting the young from such involvement parents play a key role both in fostering substance use and in Strategies, 1998). Research continues to demonstrate that strategies must include effective parental involvement (Drug substance abuse is to recognize that high quality prevention 1997; Su, Hoffman, Gerstein & Johnson, 1997). (Bogenschneider, Wu, Raffaelli, & Tsay, 1998; Cohen & Rice,

Consequence of the consequence o



eliminate these hazards (Bronfenbrenner, 1986; Hawkins, Catalano substance abuse and then take steps to either reduce or risk factors in the psychosocial environment that contribute to youthful Prevention strategies using this approach would first identify various Newcomb & Felix-Ortiz, 1992; Petraitis, Flay and Miller, 1995). smoking, and a high fat diet) (Hawkins, Catalano, & Miller, 1992; risk factors (e.g., risk factors for heart disease = sedentary life-style, human development, like heart disease, is influenced by multiple young guided this study. The first, a risk-focused approach, suggests that Two models for dealing with substance use and abuse prevention for the

1986). factors (Newcomb & Bentler, 1989; Newcomb, Maddahian, & Bentler group (e.g., deviant peers who approve of drug use) as sources of risk schools (e.g., poor school adjustment and academic failure) and the peer social environment as the family (e.g. poor parental supervision), the abuse. Particular attention has been devoted to such aspects of the hoods) hazards that increase the vulnerability of the young to substance parents), or social environmental (poverty or drug infested neighborindividual (e.g., low self-esteem), interpersonal (e.g., permissiveness by In the social sciences, risk factors have been defined as

increases the vulnerability of the young for problems like chronic levels of lead poisoning, and it is the convergence of multiple factors that persistent substance abuse. Instead, risks often accumulate, much like poverty) by itself seldom places children in sufficient jeopardy for alcohol and drug use. According to this view, a single risk factor (e.g. factors that will influence such problematic outcomes as youthful like heart disease, is influenced not just by one, but by multiple risk An important idea conveyed by this view is that human development,

> NOOE. APREVENTION

exclusive focus on risks to that of identifying sources of model that influenced this study seeks to move beyond an defined as pathological. Consequently, the second prevention certainly important, this approach only underscores how the health of the young is either jeopardized or in danger of being protection and resiliency that the young may draw upon.

understand those circumstances and characteristics in which the part of the young underscores how important it is to escape the abuse of substances (or other problematic neighborhoods or poverty, but who manage somehow to who are subjected to such things as drug infested Werner, 1990) refer to research on the majority of children Proponents of this perspective (Garmezy, 1983; Rutter, 1987; youth (Bernard, 1987; 1993; Newcomb & Felix-Ortiz, 1992). specific conditions that facilitate the positive development of outcomes) and to lead successful lives. This "resiliency" on This emphasis on protective factors draws attention to

Although identifying and reducing the impact of risk factors is health-promoting behaviors and competencies are called when facing stressful or risky circumstances (Garmezy, 1983; be adaptative, and to function in a socially competent manner Steinberg, 1991;Werner, 1990) enhance the ability of youngsters to resist stressful life events, individual capabilities or environmental resources that upon. According to this viewpoint, protective processes are

on children who successfully adapted to such adverse risk and protective factors that either foster or prevent the parent-child relationship, in turn, provides many of its own parental abuse, marital discord, and mental illness. The conditions as physical disabilities, war, poverty, abandonment, The study of protective processes was inspired by research use and abuse of substances by the young.



either as risk or protective factors for youthful substance abuse. limited evidence about how various parental influences may function (Barnes & Farrell, 1992;Turner, 1994). Recent research has provided either fostering or preventing substance use and abuse by the young community), the family probably has the strongest consequences for compared (e.g., family, school, church, neighborhoods, and the larger When the various sources of risk and protective factors are

the use of substances by the young (Bernard, 1993). contrast, parents who communicate clear expectations against substance use (i.e., a protective factor) can play key roies in preventing Bogenschneider,Wu, Raffaelli, & Tsay, 1998; Shedler & Block, 1990). In use by the young (Baumrind, 1991; Block, Block, & Keyes, 1988; use (i.e., a risk factor), perhaps to the point of being neglectful, youthful substance use. First, recent investigators have suggested that uninvolved, or rejecting, may be a strong predictor of alcohol and drug example, that parental permissiveness toward or tolerance of substance parents may influence their children through their own attitudes and tics, attitudes, values, and personal practices that may contribute to attributes of mothers and fathers, including mental health characterisvalues about alcohol and drug use. Studies consistently indicate, for Important forms of parental influence can be classified as the personal

Selman, 1987). Substance use by the young, for example, often as depression or excessive stress reactions (Beardslee, Schultz, & which mothers and fathers suffer from a form of psychopathology, such risk factor for youthful alcohol and drug use involves the extent to substance use. Parents who themselves consume alcohol and use drugs Barrera, 1993). A final personal characteristic that serves as a parental young (Chassin & Barrera, 1993; Chassin, Pillow, Curran, Molina, & appear to function as models of substance use and abuse for their another personal characteristic that serves as a risk factor for The parents' own pattern of alcohol consumption and drug use is

parents are less likely to initiate alcohol and drug use and

(Kandel & Andrews, 1987; Spoth, Yoo, Kahn, Redmond,

affectionate behavior, and using them as confidantes

1996; Turner, 1994). Children who are attached to their

these practices (Barnes & Farrel, 1992; Turner, 1994; are less likely to be influenced by deviant peers to initiate

OF PARENTS THE INFLUENCE

Bogenschneider, Wu, Raffaelli, & Tsay, 1998)

increases to the extent that depressed parents experience

referred to as monitoring or supervision (Peterson & sion (Baumrind, 1991; Peterson & Hann, in press). Duncan, 1996; Duncan, Duncan, Biglan, Ary, 1998). (Barber, 1992; Barber, Olsen, & Shagle, 1994; Duncan & into such deviant activities as substance use and abuse to foster social competence and prevent the drift of youth who are aware of and manage their children's schedules, Hann, in press). Growing evidence indicates that parents Especially important in the adolescent substance abuse litfirm control with the young characterized by consistent peer associations, activities and physical whereabouts help rule enforcement, the use of reason, and parental supervi-Another protective factor provided by parents is the use of erature is a particular dimension of parental firm control,

Arizona's parents that either prevent or foster alcohol and drug use in children. identify (or target) attitudes, beliefs, and behaviors of missiveness). Consequently, the present study seeks to consistent rule enforcement) and reject strategies that enceptions of the potential risks, protections, and possible which is the need for more information about parents' per-Many issues remain to be examined, the most prominent of courage alcohol and drug use (e.g., punitiveness and perprevent substance use (e.g. supportiveness, monitoring, parents indicate that they use parenting strategies which key element of concern is the extent to which Arizona's sources of prevention in the social lives of their children. A

emotional closeness, sharing positive activities, receiving involves a variety of activities, including identification, tance between parents and children. Moreover these pat-Duncan, Eddy, Fagot, & Fetrow, 1994; Duncan & Duncan, 1996). Children's attachment or bonding with parents 1986; Brook & Brook, 1992; Spoth, Yoo, Kahn, Redmond, and parents (Brook, Brook, Gordon, Whiteman, & Cohen, important protective factors, attachment between children terns of interaction are disruptive to one of the most patterns of behavior of this kind may promote greater dis-1996; Duncan, Duncan, Biglan, & Ary, 1998). Dysfunctional risk factor) with the young (Barnes & Farrel, 1992; Dishion, lead to escalating levels of recrimination and conflict (i.e., a forms of discipline. These child-rearing behaviors, in turn, and drug use by using hostile, punitive, and inconsistent Specifically, parents contribute to risk factors for alcohol for the use and abuse of substances by the young. therefore, is another source of risk or protective factors The quality of the relationship established by parents, (Peterson & Hann, in press). discipline to protect the young from substance use and abuse effective bonds with children and provide the necessary personal competence may find it difficult to maintain Parents who feel stressed, depressed, or low in capable of functioning effectively as mothers and fathers. flict, parent-child conflict, unemployment) and are less a higher frequency of negative life events (e.g., marital con-

#### Design and Sampling

primary intent was to empirically identify possible avenues of substance and protective factors, with a particular focus on parenting issues. A use prevention that either make use of parental involvement or were tions about alcohol and drug use by the young as well as associated risk specific objectives of this project involved assessing parents' percep-1500 randomly selected parents who reside in the state of Arizona. The The overall design of this project called for telephone interviews of viewed by parents as an effective means of preventing substance use by

and was under the age of 18. was instructed to think about their oldest child who both lived at home children's characteristics or their relationship with a child, each parent phone interview, when asked to respond about either their own households whose residents have recently moved. During the teleprobability of being sampled, including unlisted numbers and those method ensures that all households with telephone numbers have a numbers was generated using the Genesys sampling system. This live at home and also have telephones. A probability sample of phone households in Arizona with parents of children under the age 18 who Using random digit dialing procedures, the sampling frame was all the

calls being made in a systematic manner. Each telephone number was interviewers were supervised by a qualified supervisor, with telephone methods to ensure that interviewing was standardized. All shifts of project. Each interviewer received 20 hours of training in survey the Department of Sociology) to conduct the interviews for this Fifty telephone interviewers were trained by the permanent staff of the was to achieve the highest possible response rate. during day and evening hours. The primary intent of these procedures called on weekdays and weekends, with care being taken to phone Arizona State University Survey Research Laboratory (a component of

METHOD

interview began with screening questions to ascertain of determining the eligibility of households did not exist, the being coded as to its outcome. Because an a priori method Sample administration was handled through the Computer The completed sample consisted of a total of 2,791 eligible Up to twenty call-backs were made to each sample point. have an eligible parent (i.e., having a child under 18 years of parents were present. Once a household was identified to a male or female parent (guardian) to participate in the study Survey Research Laboratory, with each telephone number Assisted Telephone Interviewing System (CATI) used in the numbers or cases were excluded from the sample: numbers were called. The following households, telephone From October 1999 to February 2000, 22,804 telephone informed refusal was received from the potential respondent. was to phone until either the interview was completed or an age who resided in the household), the standard procedure was made randomly for those households in which both whether children under 18 resided in the home. Selection of

- Not in service; not a residence;
- A residence, but interviewers spoke with someone who could confirm there were no children present;
- English or Spanish not spoken;
- Interviewers were unable to complete the introduction unable to complete the interview due to health or lanbecause the informant hung up; or respondents were
- called to select a respondent, but was disconnected when The phone number was working when interviewers first they called back to complete the interview;
- Interviewers were unable to determine eligibility of the

households of which 1,503 interviews were completed, a recate that households without telephones are concentrated in low income households are underrepresented in the sample) underestimate the influence of low-income households (i.e., study that show differences by income groups are likely to the lower economic strata. Therefore, the findings of the course, were not contacted in this study. National data indisponse rate of 51%. Households without telephones, of

## Sample Characteristics

In reference to marital status characteristics, 68.75% More than four-fifths (89%) of the parents interviewed in this 920 (61.33 %) being mothers and 580 (38.66%) being fathers. The sample for this project consisted of 1503 parents, with (n=1025) of these parents were married, 15.3% (n=228) were study lived in urban areas; while only 11% lived in rural areas. these parents were of European-American heritage (62.75% the sample, whereas stepparents (5.6%, n=83), adoptive divorced, 3.8% (n=56) were separated, 1.5% (n=22) were much smaller proportions of the sample. A large majority of parents (1.1%, n= 17), and foster parents (.3%, n=17) were biologically related to their children totaled 90.2% (1342) of widowed, and 8.6% (n=128) were single. Parents who were were African-Americans, 4.0% (59) were Native-American, n=931), whereas 27.9% (n=415) were Hispanic, 2.2% (n=33) 1.3% (19) were Asian, and 1.9% (28) classified themselves as

The age of the oldest child for these parents ranged from 71.5% (n=1173) being the parents of either 1 or 2 children. mothers and fathers were parents ranged from 1 to 8, with The number of children in each family for whom these



40.0% (n=605) were parents of youngsters ages 5 to 12, and 42.8% (n=1) Muslim, 15.2% (n=225) other, and 16.3% (n=242) reported none. (n=378) Protestant, 7.6% (n=113) Mormon, 1.0% (n=15) Jewish, .1% ligious affiliations of these parents were 34.3% (n=508) Catholic, 25.5% (n=642) had oldest children in the age range of 13-17 years old. The re-(n=253) of these parents had an oldest child 4 years of age or below, birth to 17. A breakdown by age of the oldest child indicates that 16.9%

cation and income that characterized this sample. The most frequent as evidenced by their self-reported educational attainments and family 232), and 10,000-20,000 (15.4%, n = 231) (see Table 2). were \$40,000-\$60,000 (19.9%, n= 298), \$20,000-\$30,000 (15.5%, n = (17.1%, n= 257) (see Table 1). The most common income categories n=490), a "high school degree" (20.5%, n = 308), and a "college degree" categories of educational attainment are "some college" (32.7%, incomes. Tables I and 2 provide details about the range of formal edu-The parents' socioeconomic status demonstrated substantial variability

### Interview Instrument

from established paper and pencil survey instruments. Interview quesdesigned for a telephone interview that were based originally on items The interview instrument consisted of 122 questions specifically

Table 1: Parents' Educational Attainment

							1480	3,447	
No Response	Graduate School	College Degree	Some College	Trade School	High School Degree	Some High School	8 <sup>th</sup> Grade	Less than 8 <sup>th</sup> Grade	LEVEL OF EDUCATION
10	132	257	490	54	308	119	45	85	FREQUENCY
[	8.8	17.1	32.7	3.6	20.5	7.9	3.0	5.7	PERCENT

tions for this instrument measured the following concepts: the responding parents, their oldest children, and their families.

METHOD

(1) parents' assessments about the seriousness of alcohol and

neighborhood risk and protective factors relating to community agencies for preventing substance use, (3) drug use by the young, (2) the relative responsibility of mental health and satisfaction with child-rearing, (12) about substance use by the young, (11) parents' perceived behavior and discipline strategies, (10) parents' attitudes protective factors for substance use, (8) parents and others of the oldest child's substance use, (14) the parents reports of perception of children's social competence, (13) perceptions who may talk to children about substance use, (9) parental effectiveness of these prevention programs, (6) general risk of age, whereas other questions were more minutes. Many of the interview questions applied generally to length, though the typical interview time was about 23 The interviews using this 122 item instrument varied in some items had less than 1500 respondents) due to a small responses varied slightly across many of the questions (i.e., content addressed by each question. The number of whose oldest child was of the proper age-range for the age-specific questions were asked only of those parents oidest child was an older child or adolescent. Consequently, age-specific in nature and applied only to parents whose parents of children whose age ranged from birth to 17 years number of parents who refused to answer specific questions.

vention programs in their communities, (5) the perceived substance use, (4) parents' awareness of substance use pre-

and protective factors for substance use, (7) parental risk and

Table 2: Parents' Reports of Family Income

their own substance use, and (15) the sociodemographics of

FREQUENCY PERCENT 95 6.3 231 15.4 232 15.5 204 13.6 298 199 162 10.8 91 6.1 38 3.5 95 6.3	No response	Over \$120,000	\$100,000-\$120,000	\$80,000-\$100,000	\$60,000-\$80,000	\$40,000-\$60,000	\$30,000-\$40,000	\$20,000-\$30,000	\$10,000-\$20,000	Under \$10,000	INCOME LEVEL
PERCENT 6.3 15.4 15.5 13.6 13.6 19.9 10.8 6.1 2.5 3.5	95	53	38	92	162	298	204	232	231	95	FREQUENCY
	6.3	3.5	2.5	6.1	10.8	19.9	13.6	15.5	15.4	6.3	PERCENT

## General Rich

quently identified a family-based risk factor, "having parents who use in the person (e.g.,self-esteem), the family (e.g., parents who use subyouth experience in their daily lives. Specifically, these parents most fre-(Hawkins & Catalano, Miller, 1992). stances), and the larger ecological context (e.g., the neighborhood) substance use in the young. Among these issues are risk factors based existing research literature as prominent risk factors that contribute to easily available" (77.9%). Such factors are commonly identified in the (85.1%), and "living in a neighborhood where drugs and alcohol are (89.8%), "living in a neighborhood where there is a lot of crime" drugs and alcohol" (91.2%), "children who have a low self-esteem" Part of this study was concerned with the identification of what Arizona scending order of frequency, are "running around with friends who use use by the young (see Figure 1). Additional risk factors, identified in deeither "lead to" or "prevent" the use of drugs. The first group of risl parents believe are the most common risk and protective factors that drugs,"(92.3%) as the most common circumstance that "leads to" drug factors are general in nature and range across a variety of settings that

Figure 1: Parents' Reponse to the Risk Factors
That Can Lead to Children's Drug Abuse

92.3 91.2 89.8 85.1 77.9

Hawng low Lang in a registration of neighborhood where there where drugs use drugs and alcohol and alcohol are easily available

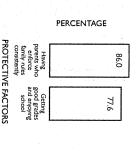
RISK FACTORS

PERCENTAGE

General Risk and Protective Factors

from alcohol and drug use. that both other parents and themselves should be the cessful. Of particular importance here is the belief by parents through which substance use prevention efforts will be sucagents. Such results clearly support the basic premise of this for prevention (or protective) efforts than these other social use. A very large percentage of these respondents (88.2%) and community programs) in preventing alcohol and drug (77.6%) (see Figure 2). Another question that dealt with the followed by "getting good grades and enjoying school " sistently" (86.0%), was based again within the family and was primary social mechanisms for efforts to protect the young study that parental involvement may be a primary mechanism overwhelmingly identified parents as being more responsible federal government, state government, religious institutions, tection compared to other social agents (i.e., police, schools, ful alcohol and drug use. Specifically, this question sought to social agent should be most responsible for preventing youthconcept of "protective factor" provided insight into which "prevent" drug use), "having parents who enforce rules con-The most common protective factor (i.e., those that dentify how responsible parents should be as sources of pro-

Figure 2: Parents' Reponse to the Protective Factors
That Can Prevent Children's Drug Abuse



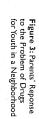
RESULTS

## Neighborhood Risk and Protective Factors

Another way of assessing risk factors is to examine the extent to which parents perceive their immediate neighborhoods as being environments that foster substance use by the young as one form of risk behavior. Specifically, this refers to the idea that substance use by the young may be one component of a larger risk-behavior complex and neighborhood circumstance that help to foster and sustain problematic behavior like the use of alcohol and drugs. This larger "risk behavior complex" includes the proposed interrelationship among such things as delinquent behavior, poor school adjustment, early sexual behavior, and substance use by the young. A "risky neighborhood circumstance," in turn, refers to the coexistence of such things as poor quality schools, inadequate neighborhood recreational facilities, a high neighborhood crime rate, and a high rate of drug trafficking.

An important aspect of this idea is the perceived accessibility or prevalence of alcohol and drugs within one's neighborhood, the most immediate part of the local community. This is illustrated by a question in the present survey asking whether "drugs are a problem" in the parents' immediate neighborhoods (see Figure 3). Results indicated that, within their neighborhoods, drugs were viewed as a "very big problem" by 31.8% and "somewhat of a problem" by 33.4% of Arizona's parents. Only 28.8% of these parents stated that drugs were "no problem" in their neighborhoods, indicating that a substantial majority of Arizona parents believe that drugs are important problems in their immediate residential drugs are important problems in their immediate residential







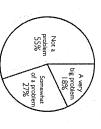
findings suggest that, compared to the risks of gun use and violence by the (45.1% or a minority) responded that guns and violence were either "a be "no problem" (see Figure 4). These results can best be understood alcohol use are issues of greater priority in their daily lives. young a substantial number of Arizona parents believe that youthful drug and very big problem" (17.8%) or "somewhat of a problem." (27.3%). Such problematic, relative to drugs and alcohol, a smaller number of parents Figure 5). Although certainly indicating that guns and violence are "think guns and violence are for youth in your neighborhood" (see primary concern—that is, "how much of a problem" did these parents by comparing them to findings for another current risk behavior of thought it was "somewhat of a problem," and only 32.3% believed it to 27.9% of parents thought alcohol abuse was "a very big problem," 39.8% problem is alcohol use for youth in your neighborhood?" Here again, A similar pattern of response is prevalent for the item "How much of a

Figure 4: Parents' Reponse to the Problem of Alcohol Abuse for Youth in a Neighborhood



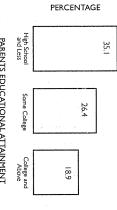
Figure 5: Parents' Reponse to the Problem of Guns and Violence for Youth in Neighborhood

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parents who were more highly educated (i.e., some college or problems for youth in their neighborhoods than were drugs, in turn, parents' with less formal education (high (i.e., parents' years of formal education) and the extent to between an indicator of the parents' socioeconomic status objective is accomplished by examining the association change as their socioeconomic status varies. Specifically, this their neighborhoods is to show how parents' perceptions believe that youthful alcohol and drug use is a problem in Another way of understanding how much Arizona parents college graduation) school or less) were more likely to view these issues as big their neighborhoods (see Figure 6). For both alcohol and which alcohol and drugs are viewed as problems for youth in

Figure 6: Parents' Reponse of Seeing a Very Big Problem in Neighborhood by Parents Educational Attainment



PARENTS EDUCATIONAL ATTAINMENT

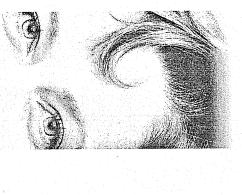
socioeconomic status neighborhoods. having greater risks for youthful drug and alcohol use than higher socioeconomic status neighborhoods in Arizona are viewed as be greater in their neighborhoods. This suggests that lower nomic status perceive the availability of drugs and alcohol to socioeconomic standing, Arizona parents of lower socioeco-These findings suggest that, compared to parents of higher

one's immediate environment often create a neighborhood drug and alcohol use by the young. These components of lack of sufficient youth recreation and community-sponsored suggests that a substantial majority of parents believe that a teenagers to do" in the respondent's neighborhood. This identified problem that there was "nothing for children and by adults are a problem in your neighborhood" (see Figure 7). asking whether "children and teenagers who aren't watched about a climate of permissiveness conveyed by the question problem (by 59.3% of the parents) was concern expressed and adolescents. For example, the most frequently identified climate that encourages problematic behavior by children community that are commonly thought to be associated with A related issue is concerned with "risky" aspects of one's use and other risk behaviors. hoods. Both of these items provide an image of youth being Almost of equal concern (by 56.9% of the parents) was the which parents viewed placing the young at risk for substance activities exists for the young in their immediate neighborviewed as having too much unsupervised time on their hands,

(20.0% of parents) and "gang activity" (20.4% of parents), were might contribute to youthful substance use, "poor schools" interestingly, two other commonly identified risk factors that



Figure 7: Parents' Reponse as a Problem in a Neighborhood



PERCENTAGE Gang 43.9 **PROBLEMS** 49.2 59.3 56.9

use by youth defined as problematic only by a minority of the responding parents environments that contribute to serious risks for drug and alcohol activity and poor schools to be a widespread aspect of neighborhood Such results suggest that most Arizona parents do not consider gang

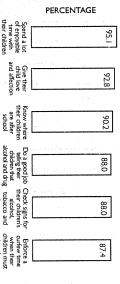
#### Aspects of Parenting The Risk and Protective

score the importance of companionship and affection as aspects of professed a belief that "parents who give their child love and affection" use (see Figure 8). This idea is reinforced again by the fact that 92.8% time with their children and teenagers" will prevent alcohol and drug 95.1% of Arizona parents that "parents who spend a lot of enjoyable particular interest in reference to protective factors is the belief by these respondents in terms of what they believe "other parents" or and drug use by the young. One way of examining this issue is to assess nary strategies for either the prevention or encouragement of alcohol Arizona parents to the role of specific parenting behavior and discipli-What emerges in the present data is the central importance assigned by either a risk or protective factor for youthful alcohol and drug use An important general area of concern is the specific role of parenting as would prevent the young from using drugs. Results of this kind under-"parents in general" should do to prevent youthful substance use. Of

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the perception of adolescents (Kandel & Andrews, 1987; Spoth, Yoo, Kohn & Redmond, 1996; Turner, 1994) protective factor by Arizona parents is consistent with previous work on risk and protective factors conducted largely from nutual attachment in the parent-child relationship. Consequently, the perceived importance of parent-child attachment as a

Figure 8: Parents' Reponse on Things They Do that Prevent Children from Drug Use



PROBLEMS

that parents should function as sources of guidance and warn their children about the risks and problems associated with alcohol persuasion with the young to discourage alcohol and drug use are likely to instill in the young greater self-responsibility and was "having parents who do a good job telling their children that alcohol and drug use is wrong." The view conveyed here is the responding parents expressed the belief that an effective means of preventing the use of alcohol and drugs in the young avoidance of risk-taking behavior (e.g., alcohol and drug use) (Baumrind, 1991; Peterson & Hann, in press). Specifically, 88.0% of Another parental strategy identified as a protective factor by the responding parents is the importance of using moderate forms of control commonly referred to as "reasoning" or "induction." The logic here is that parents who use reason and

Closely related to this idea are the parents' expressed beliefs in the efficacy of another form of moderate parental control concept monitoring designates the extent to which parents supervise their children's activities, schedules, and associations commonly referred to as monitoring, that functions as a protective factor in reference to youthful alcohol and drug use. The (88.0% thought this "prevented" drug use)." Such results for moderate forms of control (i.e., reasoning and monitoring) that thought this "prevented" drug use), and (3) "checking for signs that their children and teenagers are using alcohol and drugs thought this "prevented" drug use), (2) "enforcing a curfew time when their children and teenagers must return home" (87.4% whether parents believed that drug use was prevented by (1) "knowing where children and teenagers are after school" (90.2% extent to which parents believe that monitoring the young will "prevent the use of drugs." Specifically, these items identified with others in a manner consistent with family rules. In terms of the present data, three questions were concerned with the

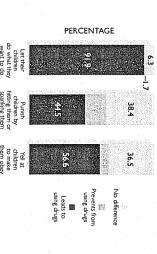
RESULTS

ior (Peterson & Hann, in press) parents believe should be used by "parents in general" are consistent with previous research on adolescents' perceptions of parental behav-

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do what they want to do"(see Figure 9). these parents who selected the "leads to drugs" response when experimentation by the young. This idea was supported by 91.9% of Moreover, the responses of Arizona parents are consistent with the Bogenschneider, Wu, Raffaelli, & Tsay, 1998; Shedlar & Block, 1990). alcohol and drugs (Baumrind, 1991; Block, Block, & Keyes, 1998; permissiveness, is a "risk factor" commonly identified by current child-rearing behavior. The first of these behaviors, referred to as general" are risk factors that some parents use as part of their typical Contrasting with beliefs about "protective" behavior for "parents in questioned about the consequences of letting "children and teenagers previously established view that permissiveness is a risk factor for drug research as increasing the potential for the young to experiment with

Figure 9: Parents' Reponse to the Impact of Permissiveness and Punitiveness on Children's Drug Use



a commonly identified risk factor (from research on adolescents' different pattern demonstrated for parents' views about punitiveness, An additional area of concern for "parents in general" is the somewhat

> (Peterson & Hann, in press). Although perhaps somewhat other parental behaviors (see Figure 9). Specifically, in the case when the varied responses for punitiveness are have somewhat mixed opinions about whether they define of which are alcohol and drug use by the young. Despite the likelihood of antisocial, delinquent, and risk behaviors, two parental punitiveness actually increases rather than decreases previous research has provided substantial evidence that parents that places children at risk for substance use physical punishment, and verbal coercion (e.g., yelling) by form of excessive control consisting of arbitrary behavior, the current research identifies parental punitiveness as a compared with the greater consensus demonstrated for protective factor for alcohol and drug use. This is particularly punitiveness (Peterson & Hann, in press), Arizona parents clear-cut results demonstrating the problematic qualities of perceptions) for alcohol and drug use by the young. Most of An ambivalent view of punitiveness is again conveyed "hitting or spanking" children/teenagers either as a risk or (although somewhat less clearly) by results for "yelling a lot" to make "children and teenagers obey" in reference to alcohol and drug use. that harsh control tends to increase the risks of youth for with current research on punitiveness, which clearly identifies attitude implies that Arizona parents are somewhat at odds true for other aspects of parental behavior. This ambivalent punitiveness as a possible risk or protective factor than is Arizona parents are more ambivalent about the use of these items that measure punitiveness, therefore, suggest that factor, parental permissiveness (see above-91.9%). Both of stantially lower than the same responses for another risk the responses for the "leads to" category (56.6%) are subexisting research that identifies punitiveness as a risk factor, Although a majority of parents' opinions are consistent with 36.5% for "makes no difference" in reference to drug use. this item were 56.6% for "leads to," "6.8% for "prevents," alcohol and drug use (See Figure 9). Specifically, responses to

surprising to "die-hard" supporters of corporal punishment,

for other parents which they appear to have difficulty living behavior that these parents perceive themselves as using with up to themselves. provides insight into whether parents recommend standards their own children. The examination of these responses should do, are responses about the kinds of child-rearing Contrasting with comments about what parents "in general"

parents, the vast majority of responding parents view displaying this kind of behavior (see Figure 10). This was true for items measuring the "expression of love" (88.2%) themselves as being very supportive and as frequently Consistent with the protective factor concept, attachment to

role of punitiveness in the etiology of youthful substance use.

contrary to previous research findings on the problematic other forms of parental behavior. These views also tend to be are more ambivalent when compared to their responses for

drug use" and 38.4% believe that punitiveness makes "no

difference"). Consequently, parents' views about punitiveness

the response that hitting or spanking "prevents drug use" or

responded in an ambivalent fashion that such behavior makes

"no difference" (i.e., 17.0% believe that punitiveness "prevents

the responding parents) indicate that this "leads to drug use."

reference to "hitting and spanking," only a minority (44.5% of

Moreover, a majority of these parents (55.4%) either chose

parents lingeneral" using supportive behavior to prevent substance use involved in drug use and other risk behaviors. This is also consistent with their children. Consequently, the responding parents appear to with the emphasis placed by these parents on the importance of young, an approach that may diminish the tendency of youth to be view themselves as being very supportive with (or attached to) their "showing a lot of approval" (80.5%), and "enjoying time spent "(89.2%)

PERCENTAGE 94.6 Figure 10: Percentage of Parents Who Do the Following with Their Child 89.2 88.2 86.1 80.5

RELATIONSHIP

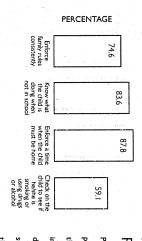
thereby enhance the ability of children and adolescents to resist internalize a rationale within the young to resist substance use. The and teenagers. The common result of parental reasoning, in turn, is to that emphasize the use of reason to influence the behavior of children by parents underscore their commitment to moderate forms of control why you want [your child] to do what you say" (86.1%). Such answers "explain how important it is to do what is right" (94.6%) and "explair parents who responded that it was "very much like" themselves to Another protective factor is emphasized by the large majority of involvement in risk-taking behavior (Peterson & Hann, in press). The intent here is to foster a sense of self-responsibility (or conscience) and

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young] about using drugs" either "frequently" or the fact that 98% of parents having older elementary or frequent use of reasoning as a strategy is again highlighted by adolescent age children indicated that they"talked with [their

of control were the indications that these parents view Barber, Olson, & Shangle, 1994; Duncan & Duncan, 1996; viewed themselves as implementing the protective (59.1%). Such responses underscore that these parents often child] to see if he/she was smoking or using drugs or alcohol" (83.6%), "enforcing a curfew" (87.8%), and "checking on [their themselves as being extensively invested in consistent rule Duncan, Duncan, Biglan, & Ary, 1998) control strategies with their youngsters (Barber, 1992; mechanisms of firm (or moderate) rather than excessive "knowing what [their child] is doing when not in school" themselves as "enforcing rules consistently" (74.6%). enforcement and monitoring (see Figure 11). Many viewed Another demonstration of commitment to moderate forms

Figure 11: Percentage of Parents Who Enforce Rules and Monitor Their Child's Behavior

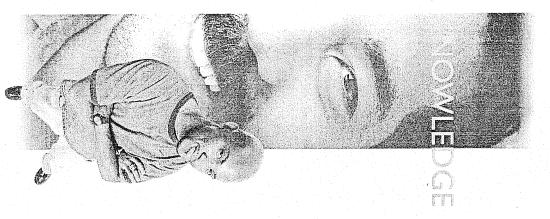


ity (45.9%, n = 689) rejected "yelling at" their sons or conveyed in the question "letting [their child] do almost Specifically, a considerable majority of these parents (68.6%, n behaviors that are risk factors for the young (see Figure 12) are parents' self-reports about their own use of parenta Contrasting with child-rearing behavior that is "protective" of the responding parents. spanking or hitting" is rejected more resoundingly by 78.4% daughters. Finally, a question asking about "punishing by anything he/she wanted to do." In the case of verbal forms of jected "finding fault with [their child] a lot," whereas a minorpunitiveness, however, a smaller majority (59.3%, n = 835) re-= 1027) reject a permissive parenting style for themselves as

interesting pattern is demonstrated for physical forms of about rejecting verbal forms of punitiveness. Another that function as risk factors is that a substantial majority reject permissiveness, but are somewhat more ambivalent An overall view of these self-identified parental behaviors more ambivalent about its use by "parents in general the use of physical aggression by themselves, despite being punitiveness in the sense that a considerable majority reject

## Parents' Personal Characteristics

Previous research conducted largely from adolescents' this behavior (Chassin & Berrera, 1993; Chassin, Pillow, substance use will serve as a model or socialize the young for drugs, with the danger being that mothers' and fathers' importance is the extent to which parents use alcohol and that serve as risk or protective factors. Of particular perceptions identifies specific personal qualities of parents



PERCENTAGE Let the child do almost anything the child want-ed to do 68.6 Figure 12: Percentage of Parents Who Do NOT Use the Following Permissive and Punitive Measures find fault with the child a lot 59.3 Yell at the child 45.9 Punish by spanking or hitting 78.4

alcohol?", 34.5% of these parents selected the response "1 or 2 days per drugs. Responding to the question "Have you ever in your life had a Curran, Molina, & Barrera, 1993). Several questions in the present day" (an important note here is that only 334 parents felt comfortable 3.0% responded 1 or 2 days per week, and .3% responded "almost every 30 days," 19.2% of these parents indicated "I or 2 days per month," the frequency of their child's alcohol consumption during the "previous alcohol "ever in his/her life." Moreover, in response to a question about dren or teenagers (ages 12-18) believed that their child had drunk 18 years of age or below). Specifically, 50.3% of parents with older chilcies for alcohol use by their children or teenagers (i.e., their oldest child month," 15.8% responded "1 or 2 days per week," and 3.6% responded "no," and 1% responded either "don't know" or "refused." When asked drink of alcohol?," 90.9% of the parents responded "yes," 9% responded and the extent to which they viewed their children as using alcohol and those with children and teenagers whose ages ranged from 12 to 18) survey dealt with these issues from the perceptions of parents (i.e., responding to this question during a telephone survey). "almost everyday." In contrast, parents reported much lower frequen-"On how many of the previous 30 days have you had a drink of

illegal drugs (e.g., cocaine, crack, speed, heroin or other illegal drugs) as Parents also were asked about their own use of marijuana and other

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to respond to questions over the telephone dealing with whether or not either they or their children had used marijuana and telephone about recent illegal behavior. Consequently, we concentrated our efforts on analyzing data gathered in response to sis. Such a high rate of refusals suggests that parents may have been concerned about answering sensitive questions over the parents to respond to questions about drug use during "the last 30 days" made these items problematic for meaningful analyoccurred "in the last 30 days" (i.e., depending on the particular question, 89-99% refused to do this). The unwillingness of other illegal drugs at "sometime in their lives." However, these parents were not willing to answer whether this behavior had questions asking about drug use at "sometime during the lives" of parents and their children well as their beliefs about their child's (i.e., their oldest child 12-18 years of age) use of these substances. Parents were willing

Table 3: Parents and Children's Alcohol, Marijuana, and Drug Use

who ever used other drugs	who ever had used marijuana	who ever had a drink of alcohol		
21.9	46.8	90.9	%	Parents
1488	1490	1494	z	encs
5.0	18.5	50.3	%	Oldest Child Aged 12-18
699	687	708	z	Child 12-18

had used other drugs (i.e., cocaine, crack, speed, heroin, or any other illegal drug) (see Table 3). These same parents responded that only 18.5% (n=127) of their children had used marijuana and only 5% (n=35) (i.e., those with children ages 12-18) responded "yes" for marijuana use and 21.9% responded "yes" for other drugs Questions about the marijuana and other drug use of parents "at sometime during their lives" revealed that 46.8% of parents

parent's viewpoint (i.e., substance abuse) may socialize the young to demonstrate the same behavior (i.e., substance use)----at least from the (i.e., the parents' perceptions). However, tests of association may at least be suggestive of the possibility that parental qualities of effects is not established by tests of association between cross-sectional variables measured from one person's perception and their perceptions of their own children's use (i.e., those 12-18 years of age). It is recognized, of course, that the direction children's tendencies to use substances?" is to examine the association between the drug and alcohol use reported by parents Beyond these descriptive statistics, an appropriate way of asking the question "Does substance use by parents influence their



and adolescents had (1) used alcohol during their lives , (2) used marijuana during their lives, and (3) used other illegal drugs during their lives. the last 30 days, the more likely they were to report that their children revealed that the more frequently parents had consumed alcohol during substance abuse (see Table 4). Results from these tests of association days [he/she] had a drink of alcohol?" and several indicators of youthful sociation between the parental variable "[number] of the previous 30 The initial set of these tests of association were concerned with the as-

Table 4: Parents' Perception of Children's Alcohol, Marijuana, and Drug Use by Parents' Drinking in the Last 30 Days

## OLDEST CHILD'S (12-18) BEHAVIOR

		Ever [	Drank	Ever Used	Marijuana	Ever Drank   Ever Used Marijuana   Ever Used Other Drugs	Other Drugs	
		%	z	%	z	%	Z	
	Never	10.3	58	3.6	56	0.0	60	
	None	46.2	307	18.5	298	5.3	303	
	i or 2 days per month	57.2	201	18.5	200	5.6	197	
	l or 2 days per week	65.8	<u>-</u>	23.9	109	6.2	Ξ	
3	Almost every day	58.3	24	25.0	20	4.6	22	

(3) used other illegal drugs during their lives. used alcohol during their lives, (2) used marijuana during their lives, and also were more likely to view their children or adolescents as having (1) tion indicated that parents who responded "yes" to "marijuana use" youthful substance use (See Table 5). Results for these tests of associavariable "ever in your life used marijuana?" and several indicators of A second set of tests examined the association between the parental

cated that parents who responded "yes" to "other drug use" were stance use (see Table 6). Results from these tests of association indiheroin, or other illegal drugs) and several indicators of youthful subable "ever in your life used other drugs?" (i.e., cocaine, crack, speed A final set of tests examined the association between the parental vari-

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this is that risk behavior practiced by parents tends to foster risk behavior by their children and their children's substance use are accurate, these tests of association provide partial support for the idea that parental lives, and (3) used other illegal drugs during their lives. Consequently, if we can assume that parents' perceptions of their own alcohol and drug use may encourage or legitimize the use of alcohol and drugs by the young. A more general way of stating more likely to view their children or adolescents as having (1) used alcohol during their lives, (2) used marijuana during their

Table 5: Parents' Perception of Children's Alcohol, Marijuana, and Drug Use by Parents' Marijuana Ever Use

### OLDEST CHILD'S (12-18) BEHAVIOR

	Ever [	Orank	Ever Drank   Ever Used Marijuana	Marijuana	Ever Used Other Drugs	ther Drugs	
	%	z	*	z	%	z	
 Used Marijuana	63.	333	29.1	327	8.3	327	
 Never Used Marijuana	38.9 375	375	8.9	360	2.2	372	

# Parents' Personal Characteristics: Psychopathology

behavior often means that parents become less capable of protecting the young from the use of illegal substances. The attachments with children or to provide them with effective discipline. Declines in these fundamental aspects of parental of psychological instability that may diminish the competence of parents (Beardslee, Schultz, & Selman, 1987). Parents who ogy of parents. Two indicators of parental psychopathology are parental depression and stress, both of which represent forms enhance the view that their children are engaging in problematic behavior (e.g., substance use). experience of depression and stress by parents also may diminish the perceived quality of the parent-child relationship and experience either depression or high levels of stress are expected to have diminished abilities either to maintain effective Another personal characteristic that is commonly implicated as a risk factor for youthful substance abuse is the psychopathol-

Results from this study support an image of parents who, when depressed and under stress, may contribute to the parents) were less likely to identify themselves as someone to whom their children would talk about drugs and alcohol, even vulnerability of the young for substance use (see Table 7). Specifically, highly depressed parents (compared to non-depressed

Table 6: Parents' Perception of Children's Alcohol, Marijuana, and Drug Use by Parents' Other Drug Ever Use

## OLDEST CHILD'S (12-18) BEHAVIOR

	Ever 1	Drank	Ever Drank   Ever Used Marijuana	,,,,	Ever Used Other Drugs	ther Drugs
	%	z	%	z	96	z
Used Other Drugs	70.5	139	31.6	136	12.2	139
Never Used Marijuana	45.3	569	15.3	551	3.2	560

to the extent of the young being "fearful" to talk to them. In terms of attachment, depressed parents reported expressing less love, less approval, less enjoyment about positive time spent with their children and teenagers. Depressed parents also have more frequent and more serious arguments with their young than is true of non-depressed parents. These results also support the expectation that parents' abilities to discipline their children will decline when they become depressed. Compared to parents who were not depressed, those who were depressed reported a greater likelihood of finding fault with and yelling at their children, combined with the relative failure to enforce family rules and curfews. Moreover, depressed parents were more likely to be less satisfied with being a parent and to be more likely to report their own children's use of marijuana and other drugs.

Table 7: Differences in Characteristics by Whether Depressed as a Parent

Strongly agree Somewhat agree Somewhat disagree Strongly disagree		Strongly agree Somewhat agree Somewhat disagree Strongly disagree	Depressed
WW 980	% very much find fauk with child	44.8 60.6 73.9 73.5	% Parent should talk about drugs and alcohol
14.0 7.7 7.4 4.7	% very stuch yell ac child	20.0 11.2 13.7 8.4	% feel child atraid very much to talk to you
63.3 63.8 72.8 77.6	% very much enforce family rules	78.0 80.2 83.4 91.2	% very much express love to the child
77.8 80.2 89.5 90.1	% very much enforce curfew	56.0 72.4 76.1 84.0	% very much show approval to the child
78.0 82.7 79.8 94.7	% surongly sndsfied as a parent	78.0 79.7 87.7 92.0	" very much enjoy ture with the child
34.6 25.2 17.5 15.9	& perceiving child having used marijuana	19.1 8.3 7.4 3.2	% argue with the child every day
192 7.8 4.8 3.5	% perceiving child having used other drugs	244	% argue seriously with the

A similar pattern of results appeared for parents who reported being highly stressed (see Table 8). Specifically, highly stressed parents were more likely to report their young as being fearful of talking to them than were parents reporting low stress. Highly stressed parents demonstrated less attachment by expressing less love, showing less approval, and less enjoyment of positive time spent with their children and teenagers. Parents who report being highly stressed also report more frequent and more serious arguments with their young than parents who are low in stress.

Table 8: Differences in Characteristics by Whether Parents Feel Stressed Out

Scrongly disagree	Surengly agree		Strongly agree Somewhat agree Somewhat disagree Strongly disagree	Stressed-out
	67.3 73.7	% do not spank child	25.6 14.0 11.0 8.1	% feel child afraid very much to talk to you
79.1	61.5	% very much enforce tamily rules	75.0 84.2 81.3 91.2	% very much express love to the child
89.4	78.8 80.8	% very much enforce curfew	53.9 73.4 78.4 83.7	% very much show approval to the child
42.3	59.4	% having used marijuana	57.7 77.5 87.3 93.5	% very much enjoy time with the child
14.4	37.5 27.4	a perceiving child having used marijuana	38.1 7.4 8.7 2.1	% argue with the child every day
18.2	30.9	% having used other drugs	25.6 4.1 1.0	% argue seriously with the child
25.6	11.6	% perceiving child having used other drugs	21.2 5.3 3.9 3.7	ર્જે very much find fault with die child
5.55 8.52 8.62 8.62 8.63	S9.6	% strongly satisfied as a parent	4.1 5.5 1.1 5.5 1.1 5.5	% very much yell at child

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Here again, these results support the expectation that parents' abilities to discipline their children will decline when they become stressed. Compared to parents who report low stress, those who reported being highly stressed were more likely to find fault with, yell at, and spank or hit their children. Moreover, stressed parents reported less ability to enforce family rules and curfews. These highly stressed parents also are more likely to report their own previous use of marijuana and other drugs as well as the belief that their own children have used these same substances. Finally, parents who are highly stressed report less satisfaction from being a parent than do fathers and mothers who are low in stress. Such results clearly indicate that less satisfaction from being a parent than do fathers and mothers who are low in stress. Such results clearly indicate that parents who are suffering from depression and high levels of stress may place their children and teenagers at risk for substance use through their diminished child-rearing abilities and adverse perceptions of their circumstances (Beardslee, Schultz, & Selman, 1987).

# Parental Attitudes, Knowledge, and Significant Other Status

Another parental risk factor that may be associated with youthful substance use are parental attitudes toward youthful substance use. Here, the assumption is that parents who have more permissive attitudes towards drug use are more likely to encourage or even inadvertently tolerate and legitimize substance use by the young. In response to questions about the acceptability of young people using drugs, a large majority of Arizona parents seem to anticipate this danger by responding in a conservative manner to questions examining their tolerance of youthful drug use. Specifically, 78.7% of these respondents "strongly agreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement "taking drugs is always wrong" and 80.5% "strongly disagreed" with the statement with the statement "

Figure 13: Taking Illegal Drugs Is Always Wrong

Somewhat agree 7%

Somewhat agree

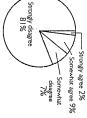
Srongly disagree 7%

Somewhat agree

Srongly agree

79%

Figure 14: Smoking Marijuana Is OK Sometimes



Closely related to general attitudes is the extent to which parents feel knowledgeable enough about alcohol and drugs to function effectively as agents of socialization by talking to the young about substance use (see Figures 15 and 16). Perhaps surprisingly, a sizable majority of these parents (76.3%) indicated that they have "enough" knowledge about alcohol to talk [to their child], with 13.2% indicating that they needed "some information" and 10.5% stating that they still needed "a lot of information." A similar pattern, though somewhat more varied, was expressed in response to the question "do you think you have enough information to talk with [your child] about the illegal use of drugs?" A total of 62.1% of the parents responded

Figure 15: Enough Information to Talk with the Child About Using Alcohol

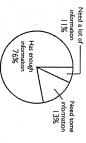
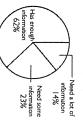


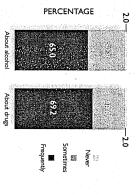
Figure 16: Enough Information to Talk with the Child About Using Illegal Drug



communicating with their children. able about alcohol and drugs to help prevent substance use by majority of Arizona parents believe that they are sufficiently knowledgeinformation." Though some ambivalence exists, a sizable needed "some information" and 14.1% stated a need for "a lot of with had "enough information," whereas 23.1% indicated that they

extent to which parents and other "social agents" (e.g., peers, teachers, others" for their young. That is, "significant other" status refers to the parents and other potentially influential persons function as "significant This kind of "communicator role" highlights the extent to which with or talking to their children and teenagers about substance use. adults make their knowledge and attitudes evident by communicating A related topic of interest is the extent to which parents and other

Figure 17: How Often Parents Talk with the Child about Alcohol and Drug Use



ages (and continuing to do so as they mature) helps to course, is that talking to children and adolescents at early aspects of their development. The assumption here, of titudes, and opinions of children and adolescents about and opinions, which, in turn, may influence the knowledge, atand other relatives etc.) express their knowledge, attitudes socialize the young to monitor themselves and resist the use

quently chosen age was 5 (22.3%), with more than a majority start talking to their children about drugs?" the most freto the question "at what age do you think parents should dren about drugs at very early ages. Specifically, in response dents declared their preference to begin talking to their chil-Another encouraging finding is that many of these responquently" (69.2%) or "sometimes" (28.8%) responses. about using drugs," with 98% choosing either the "freasking whether these parents had "talked to [their child] Moreover, a very similar pattern was evident for a question quently" (65.0%) or "sometimes" (33.0%) responses. using alcohol," 98% of these parents chose either the "freitem asking whether they had "talked with [their child] about they undertake substantial efforts to talk with their children Specific to these results, parents from Arizona indicated that about alcohol and drugs (see Figure 17). In response to an

> these parents believed that such talks should be initiated at (50.9%) of these parents indicating that "talking" should be fathers choosing an earlier age. least by age 12, with the vast majority of these mothers and initiated during or before the age of 6. Moreover, 98.5% of

RESULTS

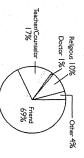
parents viewed themselves as "significant others" for adolescents' perceptions of these issues other" status, their acknowledgement of the powerful parents believe in the importance of their own "significant selected their youngster's "friends" as a primary alternative family boundaries, a large majority (68.7%) of parents family (see Figure 18). More than two thirds of these parents using drugs and alcohol within the immediate and extended you think [your child] would be most likely to talk to" about agents." In this case, the respondents were asked "whom do Another interview question dealt with the extent to which influence of peers corresponds with earlier research on (16.6%) in order of priority (see Figure 19). Thus, although significant other, with teachers being a distant second (e.g., siblings, aunt or uncle, grandparent or cousin). Beyond chose some other immediate and extended family member would "talk with" compared to only small numbers who (70%) designated themselves as the person whom their child advising their children relative to other potential "social

Figure 19: Non-Relatives Most Likely to Talk with the Oldest Child (Age 12-18) about Alcohol and Drug Use

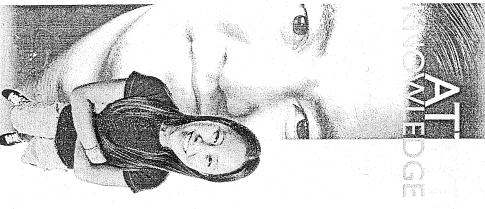
Figure 18: Family Members Most Likely to Talk with the Oldest Child (Age 12-18) about Alcohol and Drug Use

-Other 2%

Aunt or Uncle 9% Grandparent 3%







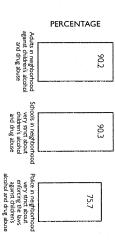
## Parents and Communities

Another issue in substance use prevention is the extent to which parents view local norms about youthful substance use in their neighborhoods and communities as being either tolerant or intolerant. Closely related to this is the extent to which communities are perceived by parents as responding to the problem of substance use with prevention programs that are perceived to be effective. Such a focus provides information about the extent to which parents feel supported by (or in conflict with) their immediate communities (i.e., neighborhoods) about the need to discourage the use of alcohol and drugs.

in your neighborhood are against the use of drugs and alcohol by chilstance use were perceived as tolerant or intolerant was assessed when was "not true" (see Figure 20), Consequently, these responses indicate neighborhood tended to be strict, whereas 24.3% responded that this Specifically, a sizeable majority (75.7%) indicated that police in their tended to be strict about substance use by children and adolescents. degree, were responses about whether law enforcement agencies Demonstrating a similar pattern, though to a somewhat diminished 8.9% responding that this was "not true" (see Figure 20). responded with the perception that the schools are strict, with only alcohol and drug use by the young. Here again, most (90.3%) parents schools and law enforcement agencies, are "very strict" in reference to to which agencies located in the immediate neighborhood, such as the young. Additional insight into community norms concerns the degree their neighborhoods are not very tolerant of substance use by the 20). Such results indicate that, from the viewpoint of Arizona parents, statement was "true," with only 9.8% choosing "not true" (see Figure dren and teenagers". A substantial number (90.2%) indicated that this parents were asked whether or not it was true that "most of the adults The degree to which neighborhood norms dealing with youthful sub-

RESULTS

Figure 20: Percentage of Parents Who Agree with the Following about Their Neighborhood

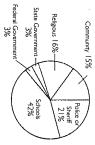


that Arizona parents view their neighborhood agencies (i.e., police and schools) as taking a fairly restrictive stance toward

the degree to which parents are aware of current prevention tion program, whereas 46.7% responded with a "no." Of the answered that they were aware of at least one such prevenyouth?" A slim majority of parents (53.1% or 792 of 1500) An initial question was asked as to whether parents were "faopinion exists among parents. Specifically, the most fre-(SADD) programs, and 24.3% identified a variety of other Driving (MADD) or Students Against Destructive Decisions program, 4.5% identified either the Mothers Against Drunk identified the Drug Abuse Resistance Education (DARE) 792 parents who responded in the affirmative, most (71.0%) miliar with any programs that work to prevent drug use by programs and extent to which they are perceived as effective. Another aspect of the perceived community environment is (45.7%), with 19.6% responding "very effective" and 28.3% Results for this item suggest that a substantial difference of indicate "how effective" they believed these programs to be. programs. A follow-up question then asked the parents to quently chosen response category was "somewhat effective"

(i.e., answering "effective." Thus, only just over half could even identify a prevention program in their immediate community and their responses about the effectiveness of these programs can only be characterized as ranging from somewhat effective to very effective. Although these results suggest cuve. parents who are aware of an intervention program do seem to believe that these efforts have some merit. The primary problem, however, is that almost half of these parents are not even aware of any intervention programs in their communities.

Figure 21: Organizations Most Responsible for Preventing Children from Using Alcohol and Drugs



A final perception about communities involves the opinions held by these parents about "which social agent should have primary responsibility for substance use prevention?" (see Figure 21). Beyond the responsibility of families (and



parents), schools are chosen most frequently (42.4%, n = 611) by these parents, followed in succession by police or sheriff (21.0%, n = 302), religious institutions (15.5%, n = 223), community programs (14.9%, n = 214), the federal government (3.4%, n = 49), and the state government (2.8%, n = 41). The pattern revealed here seems to be one of assigning most responsibility to "social agencies" that directly impact the lives of the young on a daily basis (i.e., schools, police, churches), whereas government may be viewed as more remote and as having substantially less responsibility.

## Parents' Knowledge of the Risk and Protective Factors for Alcohol and Drug Use

The data was also studied to see if parental knowledge of factors that prevent or lead to youth drug use was related to parenting behaviors that have been shown to keep children from using substances.

The following factors were assessed to determine which parents did and did not know that presence of the factor would place a child at risk for drug use:

- children living in a neighborhood where alcohol and drugs are easily available,
- high crime rate areas,
- hanging out with friends who use drugs and alcohol,
- having parents who use drugs,
- having parents who let children do what they want to do.

The results of the analysis are presented in Table 9.

Parents who did not know the risk factors for drug use tended to have lower incomes and education; they also tended to be Hispanic and Native American. These parents were more likely to be Catholics, whereas parents who could identify the causes of youth drug use were more likely to be non-Catholics or Mormons.

#### RESULTS

Parents who knew the risk factors for drug use were more likely to think that they have the primary responsibility for their children's substance use. Parents with no knowledge of risk factors were also less familiar with substance use prevention programs for youth.

Differences in parenting behaviors and beliefs were also found. The data suggests that parents who lacked knowledge of factors that might lead to youth substance use were less likely to keep tabs on their children or enforce curfew rules.

These parents were also less likely to actively monitor and check their children's alcohol and drug use or explain to their children that they should do what is right or do what parents say. Feelings of helplessness in preventing their child from using drugs and controlling their child's behavior, and symptoms of depression were more prevalent among these parents. The same analysis was done for the following factors that have been shown to inhibit youth drug use:

Table 9: Difference in Parents' Characteristics by Knowledge of Risk Factors

Familiar with Substance Yes No	Religious Affiliation Caulolic Processant Processant Mormon Jewish Muslim Other	Income Under \$20,000 \$20,000-\$30,000 \$30,000-\$40,000 \$40,000-\$60,000 \$60,000-\$60,000 \$60,000-\$100,000 Over \$100,000
ce Prevention Program 44.7 55.3	38.6 24.1 24.1 3.2 0.3 0.3 16.1 17.4	727.6 227.6 15.5 16.9 8.6 4.8
\$ 5.		
57.9 42.1	33.1 26.3 9.8 1.2 14.7	19.7 15.6 14 12.2 17.7 7.4
	Ethnicity White, Anglo White, Anglo Hispanic, Ladno Black, Aff. American Nauve American Asian & Pislander Other	Education Grade school or less Some high school High school Trade school Some college College degree Gradiate school & more
	46.7 37.2 37.2 2.8 6.8 1.9 2.5	12.4 13.3 22.9 33.5 31.5 11.1 6.3

67.8 25.5 1.8 2.1 1.2

5.8 5.8 3.9 3.5 19.5 9.5 Knowledge (%)

置 good grades,

parents knowing where kids are after school,

parents enforcing rules,

醫 parents telling kids it's wrong to use alcohol and drugs,

parents checking signs of their children's alcohol and drug use.

The results are presented in Table 10.

As with the risk factors, several differences were found. For example, parents who lacked knowledge of the protective

effects of the above factors tended to have lower incomes and educational levels. They were also more likely to be Hispanics or Native Americans, Catholic, single, separated or cohabiting couples, and 18 to 24 years of age.

In general, these parents were less familiar with alcohol and drug prevention programs, less likely to think that parents were responsible for their child's drug use, and less likely to enforce curfew. Moreover, they were more likely to yell at and find fault with their children. They are also less capable of handling their children's behavior and preventing them

from alcohol and drug use or explaining the dangers of

protective factors tended to be more depressed and stressed. signs of approval. Finally, parents who did not know about should obey parents, what is right, expressions of love, and alcohol and drugs. Little emphasis is placed on why children

likely to prevent children from using alcohol and drugs. In parents who could identify the risk factors for youth drug drug use risk factors believed that the listed protective contrast, only 35% of the parents who lacked knowledge of use also believed that all the major protective factors were edge of risk and protective factors. Seventy-two percent of

It is also interesting to note the correlation between knowl-

Table 10: Difference in Parents' Characteristics by Knowledge of Protective Factors

Explain Why Do What Parents Say Yery much 80.8 Somewhat 14.7 No 4.5	Show Approvat Very much Somewhat No	Feel Stressed Out Strongly agree Scrnewhat agree Somewhat disagree Strongly disagree	Unable to Prevent Children Scrongly agree Somewhat agree Somewhat disagree Scrongly disagree	Find Fault with Children Very much Scriewhat No	Enforce Curfew Very much Somewhat No	Familiar with A&D Prevention Program Yes 43.8 No 56.2	Marital Status Single, never married Plarried Separated Divorced Widowed Cohabiting	Ethnicity White, Appl Hispanic, Launo Black, Afr. American Native American Ksian, Pacific islander Other	Income Under \$20,000 \$20,000,\$30,000 \$30,000,\$40,000 \$40,000,\$40,000 \$40,000,\$40,000 \$40,000,\$40,000 \$40,000,\$40,000 \$40,000,\$40,000	
90.8 80.8 14.7	78.7 19.2 2.1	5.6 16.7 15.1 62.6	n from Substance Use 8.5 17.3 24 50.1	8.7 33.4 57.8	79.7  11.5  8.8	ion Program 43.8 56.2	10,7 63,5 5,1 15,8 1,1	53,9 33,1 3,1 6,6 1,9	32.5 19.8 13.6 13.6 7.1 3.2	Lack of Knowledge (%)
88.3 11 0.7	82.2 17.2 0.6	72.2 13.1 14.1 76.6	2.7 9.5 14 73.7	35.6 61.4	93.1 5.2 1.7	±52	77. 72.1 14.8 14.8	66.9 26.1 1.5 3.1 0.9 1.4	20.1 15 14.5 22.5 13.4 13.4 5.7	Knowledge (%)
	Explain Doing What Is Right Very much 91 Somewhan 6 No 0.1	Express Love Very much Somewhat No	Depressed as Parents Strongly agree Somewhat agree Somewhat disagree Strongly disagree	Children's Behavior More Strongly agree Somewhat agree Somewhat disagree Somewhat disagree Strongly disagree	Yelling at children Very much Somewhat No	Parents More Responsible Than Other Institutions Place 182 Less 1.3 Same	Age 18-24 25-34 35-44 45-54 55-64 55-64	Religious Affiliation Carlolic Protestant Hormon jewish Huslim Other None	Education Grade school or less Some high school High school Trade school Same college College dagree Gradata school or more	
	Right 91.3	65.4 13.8 0.8	5.9 19.3 12.6 62.2	Than Parents Can Handle 5.4 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	8.2 49.7 42	ble Than Other Instituti	11.2 36.9 36.9 11.8 2.7 0.53	40.4 22.6 3.8 0.3 0.3 14.3	8.4 11.6 12.9 13.3 13.3 10.2 5.4	Lack of Knowledge (%)
	0.1 3.9 3.6	89.4 10.5 0.1	12.8 10.1 75.1	andle 1.9 6.6 12.8 78.7	4.7 47.1 48.2	91.9 0.2 7.9	1.7 32 14.5 2.1 0.8	31.6 26.9 10.5 14.6 14.6	9.3 6.5 17.8 3.3 31.9 20.2	Knowledge (%)

factors were likely to prevent alcohol and drug use.

or increase their child's risk for drug use. between what parents know about the factors that lead to These findings suggest that there is a real relationship drug use and their attitudes and behaviors that can decrease

#### and Rural Areas Profiles of Parents in Urban

rural areas are similar in educational attainment and marital significantly (Table 11). For example, parents in urban and In general, parents in urban and rural areas do not differ illicit drug use patterns. status. They also have símilar lifetime and current alcohol and

When it comes to parenting, parents in urban and rural areas exhibit almost the same knowledge and behavior in the fol-

- III frequency by which they talk with their kids about alcohol
- whether they need information on alcohol and drug use;

麗 familiarity with alcohol and drug prevention programs;

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置 and enforcing curfew time

love, or show a lot of approval. Urban and rural parents examine their relationships with their children; whether they They tend to respond in similar fashion to questions that exhibit the same rates of depression and stress. find fault with the child, spank or yell at their child, express

A few significant differences do exist between the two school. However, rural parents are more likely to monitor groups. Urban parents are more likely than rural parents to children's behavior. than rural parents believe that they are able to deal with their enforce family rules or to know what their children do after their children's use of alcohol and drugs. More urban parents

percentage of urban parents accurately perceive risk factors tective factor questions do not show differences, a higher as leading to their child's or teenager's alcohol and drug use. Even though rural and urban parents' responses to the pro-

Table 11: Difference in Parents' Characteristics by Area They Reside

ents in Urban (%)	ents in Urban (%)   Parents in Rural (%)		Parents in Urban (%)	Parents in Sural (%)
		Know What Children Do Outside School	Outside School	
i.	69	Yery much	84.5	74.8
ào	25.6			17.6
	S.4	26	=	5.6
	-	Children's Behavior More Than Parents Can Handle	Than Parents Can Han	dle
5	70.8	Strongly agree	2.6	4.2
	16.9	Somewhat agree	7	H
	12.4	Somewhat disagree	-	16.1
		Strongly disagree	177.4	65.5

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